TC 96-191 Rev. 10/89 Execute in duplicate

COMMONWEALTH OF KENTUCKY – TRANSPORTATION CABINET DIVISION OF MOTOR VEHICLE LICENSING STATE OFFICE BUILDING FRANKFORT, KY 40622

Affidavit Supporting Vehicle License Application

STATE OF KENTUCKY, CO	DUNIY OF						
The affiant,	e) (Stree						
(Nam	e) (Stree	et)	(City of Post Office)			(County)	
Kentucky, states the	at he is the owner of a vehicle for	which a 20	license is t	o be issued, that sa	id vehicle is describ	ed as follows:	
Identification Number		Make		Model Number			
Style Body	Yr. Model		and that said	vehicle was acqui	red from		
(City)	(State)	on the	e	day of			
	, State of Kentucky we lice was last licensed in Cour	ıcky, under licei	nse number			_	
	ought into Kentucky on the						
		-		(S	Signature of Affiant)		
Subscribed and sworn before	re me, this						
day of	, 20	_					
		(Signature of Person Administering Oath)					